## Issue Classification | 09902128



| Application/Control | No. |
|---------------------|-----|
|                     |     |

Examiner

Yolanda L Wilson

## Applicant(s)/Patent Under Reexamination

SHILLINGTON ET AL.

Art Unit 2113

| ORIGINAL           |   |     |  |   |         | INTERNATIONAL CLASSIFICATION |   |                      |  |  |  |             |  |  |  |
|--------------------|---|-----|--|---|---------|------------------------------|---|----------------------|--|--|--|-------------|--|--|--|
| CLASS SUBCLASS     |   |     |  |   | CLAIMED |                              |   |                      |  |  |  | NON-CLAIMED |  |  |  |
| 714 38             |   |     |  | G | 0       | 6                            | F | 11 / 00 (2006.01.01) |  |  |  |             |  |  |  |
| CROSS REFERENCE(S) |   |     |  |   |         |                              |   |                      |  |  |  |             |  |  |  |
| CLASS              | CLASS SUBCLASS (ONE SUBCLASS PER BLOCK) |     |  |   |         |                              |   |                      |  |  |  |             |  |  |  |
| 717                | 124                                     | 125 |  |   |         |                              |   |                      |  |  |  |             |  |  |  |
|                    |   |     |  |   |         |                              |   |                      |  |  |  |             |  |  |  |
|                    |   |     |  |   |         |                              |   |                      |  |  |  |             |  |  |  |
|                    |   |     |  |   |         |                              |   |                      |  |  |  |             |  |  |  |
|                    |   |     |  |   |         |                              |   |                      |  |  |  |             |  |  |  |
|                    |   |     |  |   |         |                              |   |                      |  |  |  |             |  |  |  |
|                    |   |     |  |   |         |                              |   |                      |  |  |  |             |  |  |  |
|                    |   |     |  |   |         |                              |   |                      |  |  |  |             |  |  |  |
|                    |   |     |  |   |         |                              |   |                      |  |  |  |             |  |  |  |
|                    |   |     |  |   |         |                              |   |                      |  |  |  |             |  |  |  |
|                    |   |     |  |   |         |                              |   |                      |  |  |  |             |  |  |  |
|                    |   |     |  |   |         |                              |   |                      |  |  |  |             |  |  |  |
|                    |   |     |  |   |         | 1                            |   |                      |  |  |  |             |  |  |  |

| □ □   | Claims renumbered in the same order as presented by applicant |       |          |       |          |       |          | CF    | PA [     | ] T.D. | [        |       |          |       |          |
|-------|---|-------|----------|-------|----------|-------|----------|-------|----------|--------|----------|-------|----------|-------|----------|
| Final | Original  | Final | Original | Final | Original | Final | Original | Final | Original | Final  | Original | Final | Original | Final | Original |
| 1     | 1   | 15    | 17       | 33    | 33       |       |          |       |          |        |          |       |          |       |          |
| 2     | 2   | 16    | 18       | 30    | 34       |       |          |       |          |        |          |       |          |       |          |
| 3     | 3   | 17    | 19       | 31    | 35       |       |          |       |          |        |          |       |          |       |          |
| 4     | 4   | 18    | 20       | 34    | 36       |       |          |       |          |        |          |       |          |       |          |
| - 5   | - 5   | 19    | 21       | 35    | 37       |       |          |       |          |        |          |       |          |       |          |
| 6     | 6   | 20    | 22       | 36    | 38       |       |          |       |          |        |          |       |          |       |          |
| 7     | 7   | 21    | 23       | 37    | 39       |       |          |       |          |        |          |       |          |       |          |
|       | 8   | 22    | 24       | 38    | 40       |       |          |       |          |        |          |       |          |       |          |
| 8     | 9   | 23    | 25       | 39    | 41       |       |          |       |          |        |          |       |          |       |          |
| 9     | 10  | 25    | 26       | 40    | 42       |       |          |       |          |        |          |       |          |       |          |
| 10    | 11  | 26    | 27       | 41    | 43       |       |          |       |          |        |          |       |          |       |          |
| 11    | 12  | 24    | 28       | 42    | 44       |       |          |       |          |        |          |       |          |       |          |
| 12    | 13  | 27    | 29       |       |          |       |          |       |          |        |          |       |          |       |          |
| 13    | 14  | 28    | 30       |       |          |       |          |       |          |        |          |       |          |       |          |
| 14    | 15  | 29    | 31       |       |          |       |          |       |          |        |          |       |          |       |          |
|       | 16  | 32    | 32       |       |          |       |          |       |          |        |          |       |          |       |          |

| NONE   | Total Claims Allowed: |                     |                   |  |  |  |
|--|-----------------------|---------------------|-------------------|--|--|--|
| (Assistant Examiner)                                 | (Date)                | 42                  |                   |  |  |  |
| /Yolanda L Wilson/<br>Primary Examiner.Art Unit 2113 | 09/08/2010            | O.G. Print Claim(s) | O.G. Print Figure |  |  |  |
| (Primary Examiner)                                   | (Date)                | 1                   | 4B                |  |  |  |